

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Filing at a Glance

Company: Transamerica Life Insurance Co.

Product Name: Paid-Up Term Life

SERFF Tr Num: AEGD-125916273 State: ArkansasLH

TOI: L04I Individual Life - Term

SERFF Status: Closed

State Tr Num: 40942

Sub-TOI: L04I.003 Single Life - Single Premium Co Tr Num: 08047

State Status: Approved-Closed

Filing Type: Form

Co Status:

Reviewer(s): Linda Bird

Author: Carl Hunter

Disposition Date: 12/16/2008

Date Submitted: 11/21/2008

Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: 1-875 05-108

Project Number: 08047

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 12/16/2008

State Status Changed: 11/25/2008

Corresponding Filing Tracking Number:

Filing Description:

Re: TRANSAMERICA LIFE INSURANCE COMPANY

NAIC # 468-86231

FEIN #39-0989781

Form Number: 1-875 05-108—Paid Up Term Policy

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 11/21/2008

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

Dear Commissioner:

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L041 Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L041.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Please find attached the above referenced form. This is new form and is not intended to replace any forms previously approved by your Department. This form is submitted in final printed form in which it will be distributed to the Insured, and is subject to only modifications in paper size and stock, ink, border, Company logo and Company address.

This Paid Up Level Term policy will be automatically issued to a surviving spouse or child insured under a Family or Children's Insurance rider when the Insured on the base policy dies. Coverage for a surviving spouse will continue until the policy anniversary nearest the date the basic insured would have reached age 65. The coverage for a surviving child will continue until his/her 25th birthday. No premium will be charged. The policy is convertible to any whole life plan offered by us at the time of conversion.

A similar policy was approved by Iowa (our State of domicile) on November 21, 2008.

If you have any questions, comments or concerns or if you need any additional information in order to complete your review, please contact me by e-mail at carl.hunter@transamerica.com, fax at (213) 741-5839, or you may call me collect at (213) 742-4004 (Pacific Time).

Company and Contact

Filing Contact Information

Carl Hunter, Contract Analyst	carl.hunter@transamerica.com
1150 South Olive Street	(213) 742-4004 [Phone]
Los Angeles, CA 90015	(213) 741-5839[FAX]

Filing Company Information

Transamerica Life Insurance Co.	CoCode: 86231	State of Domicile: Iowa
Contract Development T-03-06	Group Code: 468	Company Type:
1150 S. Olive St.		
Los Angeles, CA 90015	Group Name:	State ID Number:
(213) 742-2241 ext. [Phone]	FEIN Number: 39-0989781	

Filing Fees

Fee Required?	Yes
---------------	-----

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		
Fee Amount:	\$50.00		
Retaliatory?	No		
Fee Explanation:	1 form X \$50.00 = \$50.00		
Per Company:	No		

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Transamerica Life Insurance Co.	\$50.00	11/21/2008	24104972

SERFF Tracking Number: AEGD-125916273

State: Arkansas

Filing Company: Transamerica Life Insurance Co.

State Tracking Number: 40942

Company Tracking Number: 08047

TOI: L04I Individual Life - Term

Sub-TOI: L04I.003 Single Life - Single Premium

Product Name: Paid-Up Term Life

Project Name/Number: 1-875 05-108/08047

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Linda Bird	12/16/2008	12/16/2008
Approved	Linda Bird	11/25/2008	11/25/2008

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Paid-Up Term Form Life		Carl Hunter	12/15/2008	12/15/2008

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Disposition

Disposition Date: 12/16/2008

Implementation Date:

Status: Filed

Comment: Company has revised policy form approved on 11/25/2008.

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form <i>(revised)</i>	Paid-Up Term Life		Yes
Form	Paid-Up Term Life		Yes

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Disposition

Disposition Date: 11/25/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form <i>(revised)</i>	Paid-Up Term Life		Yes
Form	Paid-Up Term Life		Yes

SERFF Tracking Number: AEGD-125916273 State: Arkansas
 Filing Company: Transamerica Life Insurance Co. State Tracking Number: 40942
 Company Tracking Number: 08047
 TOI: L041 Individual Life - Term Sub-TOI: L041.003 Single Life - Single Premium
 Product Name: Paid-Up Term Life
 Project Name/Number: 1-875 05-108/08047

Amendment Letter

Amendment Date:
 Submitted Date: 12/15/2008

Comments:

Ms. Bird--

Thank you for reopening this filing.

The revised Paid-Up Term Policy now attached has revised cash values on the Data Page (Page 2) and an increase in the Interest Rate for the Term Period from 4% to 5%. Please replace the policy as approved on 11-25-08.

Thank you,
 Carl Hunter

Changed Items:

Form Schedule Item Changes:

Form Schedule Item Changes:

Form Number	Form Type	Form Name	Action	Form Action Other	Previous Filing #	Replaced Form #	Readability Score	Attachments
1-875 05-108	Policy/Contr	Paid-Up act/Fraternal Term Life Certificate	Initial				52	1-875 11-108 Final 12-4-08.pdf

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Form Schedule

Lead Form Number: 1-875 05-108

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	1-875 05-108	Policy/Cont Paid-Up Term Life ract/Fratern al Certificate	Initial		52	1-875 11-108 Final 12-4- 08.pdf



Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA 52499
Marketing Office: Los Angeles, CA 90015
Administrative Office: 4333 Edgewood Rd NE
Cedar Rapids, IA 52499

POLICY FORM PUF
Individual Life Insurance

INSURED JOHN DOE

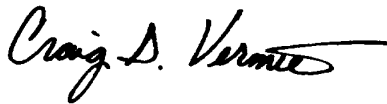
SPECIMEN POLICY NUMBER

FACE
AMOUNT \$1,000

JAN 01, 2009 DATE OF ISSUE

If the Insured dies while this policy is in force during its term period, Transamerica Life Insurance Company will pay the face amount to the beneficiary, subject to the provisions of this policy.

Signed for the Company at Cedar Rapids, Iowa, on the date of issue.

A handwritten signature in black ink, appearing to read "Craig S. Verme".

Secretary

A handwritten signature in black ink, appearing to read "Brenda Clancy".

President

Paid-Up Term Life Insurance - Nonparticipating
Convertible on Expiry Date
Face Amount Payable at Death of Insured During Term Period

GUIDE TO POLICY PROVISIONS

	Page
Assignment of Policy	5
Beneficiary Provisions	4
Cash Surrender	3
Change of Beneficiary	4
Conversion Provisions.....	4
Definitions	3
Misstatement of Age	5
Owner's Rights	5
Payment of Proceeds at Death.....	5
Policy Data.....	2
Table of Guaranteed Values.....	2
Term Period	3

POLICY DATA

EXPIRY DATE	JAN 1, 2024	JAN 1, 2009	POLICY DATE
INSURED	JOHN DOE	10	AGE OF INSURED
SEX OF INSURED	MALE	SPECIMEN	POLICY NUMBER
FACE AMOUNT	\$1,000.00	15 YEARS	TERM PERIOD
AMOUNT CONVERTIBLE	\$5,000.00	024378	ORIGINAL POLICY NUMBER
CLASS OF RISK	STANDARD NONSMOKER		
BENEFICIARY	ESTATE OF INSURED		
OWNER	ESTATE OF INSURED		

TABLE OF GUARANTEED VALUES

DATE	CASH VALUE	DATE	CASH VALUE
JAN 1, 2009	\$7	JAN 1, 2017	\$6
JAN 1, 2010	8	JAN 1, 2018	6
JAN 1, 2011	8	JAN 1, 2019	5
JAN 1, 2012	8	JAN 1, 2020	4
JAN 1, 2013	8	JAN 1, 2021	3
JAN 1, 2014	7	JAN 1, 2022	2
JAN 1, 2015	7	JAN 1, 2023	1
JAN 1, 2016	7	JAN 1, 2024	0

TABLE AND INTEREST RATE USED IN COMPUTATIONS

MORTALITY TABLE USED	INTEREST RATE FOR TERM PERIOD
2001 CSO AGE NEAREST BIRTHDAY	5.00%

DEFINITIONS

In this policy:

We, us and our refer to Transamerica Life Insurance Company.

The **beneficiary** is a person to receive the proceeds in the event of the Insured's death.

Term period means the period during which coverage is provided.

Cash value means the cash value shown in the Table of Guaranteed Values.

BRIEF DESCRIPTION

This policy has been issued under the paid-up term insurance provisions of a Family Insurance rider, an Insurance on Children rider or a term insurance policy. The policy provides paid-up term life insurance for the term period shown in the policy data. The amount of insurance is the face amount shown in the policy data. The policy terminates on the expiry date.

The values shown in the Table of Guaranteed Values may be taken in cash upon surrender of this policy.

The policy may be converted on the expiry date to a premium paying permanent plan of life insurance offered by us at that time. In this event, a new policy will be issued.

This is a brief description. The insurance is fully described in the various provisions of the policy.

TERM PERIOD

Period During Which Coverage is Provided - The term period of this policy is shown in the policy data. The term period begins on the policy date and continues to the expiry date. No insurance is provided on the expiry date.

GUARANTEED VALUES

Cash Surrender - This policy may be surrendered at any time for its cash value. If the surrender is made within 31 days after any policy anniversary, the cash value of the insurance will not be less than its cash value on that anniversary.

Payment of the Cash Value - We may delay the payment of the cash value for a period of not more than six months after we receive written request for the cash value.

Table of Guaranteed Values - The cash values of this policy are shown in the Table of Guaranteed Values in the policy data. The value between any two consecutive dates shown will be determined by interpolation. Values for any policy anniversary not shown will be furnished upon request.

Basis of Computation - Values and reserves in this policy are based on the mortality table and interest rate shown in the policy data. The reserve is the net single premium at the attained age for term insurance to the end of the term period. The cash values of this policy are not less than the minimum values required by the law of the state in which this policy is delivered.

CONVERSION PROVISIONS

Changing to Another Plan of Insurance - If this policy has not been surrendered for its cash value, it may be converted to any plan of whole life or endowment insurance offered by us on the policy expiry date. The request for conversion must be made in writing and the required premium paid within 30 days before the expiry date. The following rules will apply:

1. The face amount of the new policy may not be less than our published minimum for the plan selected nor greater than the amount convertible shown in the policy data. At least one plan will be available for conversion of the amount convertible of this policy.
2. The date of the new policy will be the expiry date of this policy.
3. The premium for the new policy will be at our published rate for the plan selected at the time of conversion. We will use the Insured's age on the date of conversion to determine this rate. The new policy will be issued at the same class of risk as this policy.

BENEFICIARY PROVISIONS

Who Receives the Proceeds - Any proceeds payable because of the death of the Insured will be paid to the beneficiary(ies). Unless changed as provided in this policy, the beneficiary(ies) will be as designated in the policy data. If a beneficiary is a partnership, any proceeds payable to that beneficiary will be paid to the partnership as it existed at the time of the Insured's death.

If the Beneficiary Dies - The interest of any beneficiary who dies before the Insured will terminate at the death of the beneficiary. The interest of any beneficiary who dies at the time of, or within 30 days after, the Insured's death will also terminate if no proceeds have been paid to that beneficiary. If the interests of all designated beneficiaries have terminated, any proceeds payable will be paid to the owner of this policy. If the owner is not living at that time, any proceeds payable will be paid to the executor or administrator of the owner's estate. If there is more than one beneficiary, we will pay the proceeds to all of the beneficiaries in equal shares unless provided otherwise in the Policy Data or by filing a satisfactory written notice with us.

How to Change a Beneficiary - The owner may change the beneficiary by filing a satisfactory written notice with us. A change of beneficiary will not be effective until recorded by us at our Home Office. When recorded, even if the Insured is not then living, the change will take effect on the date the notice was signed, except that any proceeds paid before we record a change of beneficiary will not be subject to the change. A beneficiary designated irrevocably may not be changed without the written consent of that beneficiary.

Protection of the Proceeds - To the extent permitted by law, no payment of proceeds or interest will be subject to the claims of any creditors of the beneficiary or to any legal process against the beneficiary.

PAYMENT OF THE PROCEEDS

Proof of Death - Any proceeds payable because of the death of the Insured will be paid in one lump sum when we receive due proof of the Insured's death. Such proof must be submitted to us at our Home Office. Appropriate forms will be made available to the beneficiary upon request. Any of our agents will assist in completing these forms without charge. All payments by us are payable at our Home Office.

GENERAL PROVISIONS

Incontestability of the Policy - This policy will be incontestable from its policy date.

Misstatement of Age or Sex in the Application - If the Insured's age or sex has been misstated, the cash values shall be computed for the correct age and sex of the Insured. The Expiry Date shown on page 2 may also be adjusted for the correction in the date of birth.

Policy Date - The policy date will be used to determine the policy anniversaries and policy years.

The Contract Consists of the Policy and the Application - We have issued the policy under the paid-up term life insurance provisions of a Family Insurance Rider, an Insurance on Children Rider or a term insurance policy. This policy, plus the application for such rider, a copy of which is attached and is a part of this policy, make the entire contract.

Who is Authorized to Make Changes in the Policy - Only our President or a Vice President together with our Secretary or an Assistant Secretary have the authority to bind us or to make any change in this policy and then only in writing. We will not be bound by any promise or representation made by any other persons.

Owner of the Policy - Before the Insured's death, only the owner will be entitled to the rights granted by this policy. If the owner is an individual and dies before the Insured, the rights of the owner belong to the executor or administrator of the owner's estate unless otherwise provided in this policy. If the owner is a partnership, the rights belong to the partnership as it exists when a right is exercised.

Assignment of the Policy - We are not responsible for the adequacy of any assignment. However, when an assignment is filed with us and recorded by us at our Home Office, the owner's rights and those of any revocable beneficiary will be subject to it.

No Dividends Are Payable - This policy does not participate in our profits or surplus.

Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA 52499
Marketing Office: Los Angeles, CA 90051
Administrative Office: 4333 Edgewood Road N.E.
Cedar Rapids, IA 52499

POLICY FORM PUF
Individual Life Insurance

Paid-Up Term Life Insurance - Nonparticipating
Convertible on Expiry Date
Face Amount Payable at Death of Insured During Term Period

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: *AEGD-125916273*

State: *Arkansas*

Filing Company: *Transamerica Life Insurance Co.*

State Tracking Number: *40942*

Company Tracking Number: *08047*

TOI: *L04I Individual Life - Term*

Sub-TOI: *L04I.003 Single Life - Single Premium*

Product Name: *Paid-Up Term Life*

Project Name/Number: *1-875 05-108/08047*

Supporting Document Schedules

Review Status:

Satisfied -Name: Certification/Notice

11/21/2008

Comments:

Attachments:

AR Bulletin 11-88 Certification.pdf

AR Readability Certification.pdf

AR Regulation 19 Certification.pdf

AR Regulation 49 Certification.pdf

TRANSAMERICA LIFE INSURANCE COMPANY

Home Office: Cedar Rapids, Iowa

BULLETIN 11-88 CERTIFICATION

Policy Form: 1-875 05-108

We certify that, for policies issued in Arkansas on the above-referenced policy form number, we will deliver the Consumer Information Notice required by Bulletin 11-88.



Cheryl Bock, Assistant Vice President
Product Implementation

11-21-08
Date

TRANSAMERICA LIFE INSURANCE COMPANY
Home Office: Cedar Rapids, Iowa

ARKANSAS CERTIFICATION OF READABILITY

This is to certify that the attached life insurance forms have each achieved a Flesch Reading Ease Score as shown.

<u>Form Number</u>	<u>Form Description</u>	<u>Flesch Score</u>
1-875 05-108	Paid-Up Term Life Insurance Policy	51.8

and each form complies with the requirements of Arkansas Statutes Annotated Sections 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.



Cheryl Bock, Assistant Vice President
Product Implementation

08/27/08
Date

TRANSAMERICA LIFE INSURANCE COMPANY

Home Office: Cedar Rapids, Iowa

REGULATION 19 CERTIFICATION

Policy Form: 1-875 05-108

We certify that, to the best of our knowledge and belief, this submission meets the provisions of Rule and Regulation 19 as well as all applicable requirements of the Insurance Division of the State of Arkansas.



Cheryl Bock, Assistant Vice President
Product Implementation

11-21-08
Date

TRANSAMERICA LIFE INSURANCE COMPANY

Home Office: Cedar Rapids, Iowa

REGULATION 49 CERTIFICATION

Policy Form: 1-875 05-105

We certify that, for policies issued in Arkansas on the above-referenced policy form number, we will deliver the Life and Health Guaranty Fund Notice required by Regulation 49.



Cheryl Bock, Assistant Vice President
Product Implementation

11-21-08
Date

<i>SERFF Tracking Number:</i>	<i>AEGD-125916273</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Transamerica Life Insurance Co.</i>	<i>State Tracking Number:</i>	<i>40942</i>
<i>Company Tracking Number:</i>	<i>08047</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.003 Single Life - Single Premium</i>
<i>Product Name:</i>	<i>Paid-Up Term Life</i>		
<i>Project Name/Number:</i>	<i>1-875 05-108/08047</i>		

Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Form	Paid-Up Term Life	11/21/2008	1-875 05-108.pdf



Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA 52499
Marketing Office: Los Angeles, CA 90015
Administrative Office: 4333 Edgewood Rd NE
Cedar Rapids, IA 52499

POLICY FORM PUF
Individual Life Insurance

INSURED JOHN DOE

SPECIMEN POLICY NUMBER

FACE
AMOUNT \$1,000

JAN 01, 2009 DATE OF ISSUE

If the Insured dies while this policy is in force during its term period, Transamerica Life Insurance Company will pay the face amount to the beneficiary, subject to the provisions of this policy.

Signed for the Company at Cedar Rapids, Iowa, on the date of issue.

A handwritten signature in black ink, reading "Craig D. Vermeir".

Secretary

A handwritten signature in black ink, reading "Brenda Clancy".

President

Paid-Up Term Life Insurance - Nonparticipating
Convertible on Expiry Date
Face Amount Payable at Death of Insured During Term Period

GUIDE TO POLICY PROVISIONS

	Page
Assignment of Policy.....	5
Beneficiary Provisions.....	4
Cash Surrender.....	3
Change of Beneficiary.....	4
Conversion Provisions	4
Definitions	3
Misstatement of Age	5
Owner's Rights.....	5
Payment of Proceeds at Death	5
Policy Data.....	2
Table of Guaranteed Values	2
Term Period	3

POLICY DATA

EXPIRY DATE	JAN 1, 2024	JAN 1, 2009	POLICY DATE
INSURED	JOHN DOE	10	AGE OF INSURED
SEX OF INSURED	MALE	SPECIMEN	POLICY NUMBER
FACE AMOUNT	\$1,000.00	15 YEARS	TERM PERIOD
AMOUNT CONVERTIBLE	\$5,000.00	024378	ORIGINAL POLICY NUMBER
CLASS OF RISK	STANDARD NONSMOKER		
BENEFICIARY	ESTATE OF INSURED		
OWNER	ESTATE OF INSURED		

TABLE OF GUARANTEED VALUES

DATE	CASH VALUE	DATE	CASH VALUE
JAN 1, 2009	\$17	JAN 1, 2017	\$11
JAN 1, 2010	17	JAN 1, 2018	10
JAN 1, 2011	16	JAN 1, 2019	9
JAN 1, 2012	16	JAN 1, 2020	7
JAN 1, 2013	15	JAN 1, 2021	6
JAN 1, 2014	14	JAN 1, 2022	4
JAN 1, 2015	13	JAN 1, 2023	2
JAN 1, 2016	12	JAN 1, 2024	

TABLE AND INTEREST RATE USED IN COMPUTATIONS

MORTALITY TABLE USED	INTEREST RATE FOR TERM PERIOD
2001 CSO AGE NEAREST BIRTHDAY	4.00%

DEFINITIONS

In this policy:

We, us and our refer to Transamerica Life Insurance Company.

The **beneficiary** is a person to receive the proceeds in the event of the Insured's death.

Term period means the period during which coverage is provided.

Cash value means the cash value shown in the Table of Guaranteed Values.

BRIEF DESCRIPTION

This policy has been issued under the paid-up term insurance provisions of a Family Insurance rider, an Insurance on Children rider or a term insurance policy. The policy provides paid-up term life insurance for the term period shown in the policy data. The amount of insurance is the face amount shown in the policy data. The policy terminates on the expiry date.

The values shown in the Table of Guaranteed Values may be taken in cash upon surrender of this policy.

The policy may be converted on the expiry date to a premium paying permanent plan of life insurance offered by us at that time. In this event, a new policy will be issued.

This is a brief description. The insurance is fully described in the various provisions of the policy.

TERM PERIOD

Period During Which Coverage is Provided - The term period of this policy is shown in the policy data. The term period begins on the policy date and continues to the expiry date. No insurance is provided on the expiry date.

GUARANTEED VALUES

Cash Surrender - This policy may be surrendered at any time for its cash value. If the surrender is made within 31 days after any policy anniversary, the cash value of the insurance will not be less than its cash value on that anniversary.

Payment of the Cash Value - We may delay the payment of the cash value for a period of not more than six months after we receive written request for the cash value.

Table of Guaranteed Values - The cash values of this policy are shown in the Table of Guaranteed Values in the policy data. The value between any two consecutive dates shown will be determined by interpolation. Values for any policy anniversary not shown will be furnished upon request.

Basis of Computation - Values and reserves in this policy are based on the mortality table and interest rate shown in the policy data. The reserve is the net single premium at the attained age for term insurance to the end of the term period. The cash values of this policy are not less than the minimum values required by the law of the state in which this policy is delivered.

CONVERSION PROVISIONS

Changing to Another Plan of Insurance - If this policy has not been surrendered for its cash value, it may be converted to any plan of whole life or endowment insurance offered by us on the policy expiry date. The request for conversion must be made in writing and the required premium paid within 30 days before the expiry date. The following rules will apply:

1. The face amount of the new policy may not be less than our published minimum for the plan selected nor greater than the amount convertible shown in the policy data. At least one plan will be available for conversion of the amount convertible of this policy.
2. The date of the new policy will be the expiry date of this policy.
3. The premium for the new policy will be at our published rate for the plan selected at the time of conversion. We will use the Insured's age on the date of conversion to determine this rate. The new policy will be issued at the same class of risk as this policy.

BENEFICIARY PROVISIONS

Who Receives the Proceeds - Any proceeds payable because of the death of the Insured will be paid to the beneficiary(ies). Unless changed as provided in this policy, the beneficiary(ies) will be as designated in the policy data. If a beneficiary is a partnership, any proceeds payable to that beneficiary will be paid to the partnership as it existed at the time of the Insured's death.

If the Beneficiary Dies - The interest of any beneficiary who dies before the Insured will terminate at the death of the beneficiary. The interest of any beneficiary who dies at the time of, or within 30 days after, the Insured's death will also terminate if no proceeds have been paid to that beneficiary. If the interests of all designated beneficiaries have terminated, any proceeds payable will be paid to the owner of this policy. If the owner is not living at that time, any proceeds payable will be paid to the executor or administrator of the owner's estate. If there is more than one beneficiary, we will pay the proceeds to all of the beneficiaries in equal shares unless provided otherwise in the Policy Data or by filing a satisfactory written notice with us.

How to Change a Beneficiary - The owner may change the beneficiary by filing a satisfactory written notice with us. A change of beneficiary will not be effective until recorded by us at our Home Office. When recorded, even if the Insured is not then living, the change will take effect on the date the notice was signed, except that any proceeds paid before we record a change of beneficiary will not be subject to the change. A beneficiary designated irrevocably may not be changed without the written consent of that beneficiary.

Protection of the Proceeds - To the extent permitted by law, no payment of proceeds or interest will be subject to the claims of any creditors of the beneficiary or to any legal process against the beneficiary.

PAYMENT OF THE PROCEEDS

Proof of Death - Any proceeds payable because of the death of the Insured will be paid in one lump sum when we receive due proof of the Insured's death. Such proof must be submitted to us at our Home Office. Appropriate forms will be made available to the beneficiary upon request. Any of our agents will assist in completing these forms without charge. All payments by us are payable at our Home Office.

Interest on Life Insurance Proceeds – We will pay interest on the proceeds of any benefit paid under the policy more than 30 days after we receive due proof of the Insured's death. We will pay interest for the period from the date of the Insured's death to the date the payment is made. The interest rate will be at least 8%, or higher if required by law.

GENERAL PROVISIONS

Incontestability of the Policy - This policy will be incontestable from its policy date.

Misstatement of Age or Sex in the Application - If the Insured's age or sex has been misstated, the cash values shall be computed for the correct age and sex of the Insured. The Expiry Date shown on page 2 may also be adjusted for the correction in the date of birth.

Policy Date - The policy date will be used to determine the policy anniversaries and policy years.

The Contract Consists of the Policy and the Application - We have issued the policy under the paid-up term life insurance provisions of a Family Insurance Rider, an Insurance on Children Rider or a term insurance policy. This policy, plus the application for such rider, a copy of which is attached and is a part of this policy, make the entire contract.

Who is Authorized to Make Changes in the Policy - Only our President or a Vice President together with our Secretary or an Assistant Secretary have the authority to bind us or to make any change in this policy and then only in writing. We will not be bound by any promise or representation made by any other persons.

Owner of the Policy - Before the Insured's death, only the owner will be entitled to the rights granted by this policy. If the owner is an individual and dies before the Insured, the rights of the owner belong to the executor or administrator of the owner's estate unless otherwise provided in this policy. If the owner is a partnership, the rights belong to the partnership as it exists when a right is exercised.

Assignment of the Policy - We are not responsible for the adequacy of any assignment. However, when an assignment is filed with us and recorded by us at our Home Office, the owner's rights and those of any revocable beneficiary will be subject to it.

No Dividends Are Payable - This policy does not participate in our profits or surplus.

Transamerica Life Insurance Company
Home Office: Cedar Rapids, IA 52499
Marketing Office: Los Angeles, CA 90051
Administrative Office: 4333 Edgewood Road N.E.
Cedar Rapids, IA 52499

POLICY FORM PUF
Individual Life Insurance

Paid-Up Term Life Insurance - Nonparticipating
Convertible on Expiry Date
Face Amount Payable at Death of Insured During Term Period